MULTIPLE DEPENDENT CLAIM FEE CALCULATION SHEET (FOR USE WITH FORM PTO-875) · CLAIMS AFTER THE AMENDMENT AS FILED DEP. BID. DID, DEP. IND. DEP. MD. . DEP. .23 5¢ 7. 8. : · 81. ध · . 1 97. TOTAL TOTAL

WAY IS DOOD YOU ADDITIONAL GLAIMS OF ANGED SERVE